

CITY OF HAYWARD
BENEFIT SUMMARY - EFFECTIVE 07/01/15

ITEM (Some provisions do not apply to P/T Employees. Consult MOU's.)	SEIU Local 1021	SEIU Local 1021	SEIU Local 1021	Local 21	HAME	Unrepresented	Unrepresented	Unrepresented	POA	Police Management	Local 1909	Fire Chiefs	Local 1909	SEIU Local 1021	Unrepresented
	CLERICAL	MAINTENANCE	CONFIDENTIAL	PROF & TECH ENG	HAME	UNREP Executive (Incl. Police & Fire Chief)	UNREP Non-Executive (Exempt)	UNREP Non-Executive (Non-Exempt)	POLICE	POLICE MGMT	FIRE	FIRE CHIEFS	FIRE OFFICERS	SR. & LIB PAGES (Budgeted & work 20 hrs or more)	ELECTED OFFICIALS
1. MAXIMUM MONTHLY MEDICAL CONTRIBUTION* (City contracts with CalPERS for Medical); please visit https://www.calpers.ca.gov/docs/2015-health-rates-bay-area.pdf for plan costs															
PERS - One Party	\$740.01	\$740.01	\$740.01	\$900.21	\$783.54	\$696.48	\$696.48	\$783.54	\$928.87	\$870.60	\$928.87	\$870.60	\$870.60	\$280.00	\$609.42
PERS - Two Party	\$1,480.02	\$1,480.02	\$1,480.02	\$1,521.78	\$1,567.08	\$1,392.96	\$1,392.96	\$1,567.08	\$1,857.74	\$1,741.20	\$1,857.74	\$1,741.20	\$1,741.20		\$1,218.84
PERS - Three or More	\$1,924.03	\$1,924.03	\$1,924.03	\$1,857.57	\$2,037.20	\$1,810.85	\$1,810.85	\$2,037.20	\$2,415.06	\$2,263.56	\$2,415.06	\$2,263.56	\$2,263.56		\$1,584.49
MOU/Resolution	Up to Kaiser - Bay Area	Up to Kaiser - Bay Area	Up to Kaiser - Bay Area	Kaiser (Add'l amounts for 1 & 2 party)	90% - 2nd Highest Plan (BlueShield NetValue - Bay Area)	80% - 2nd Highest Plan (BlueShield NetValue - Bay Area)	80% - 2nd Highest Plan (BlueShield NetValue - Bay Area)	90% - 2nd Highest Plan (BlueShield NetValue - Bay Area)	Blue Shield - Bay Area	2nd Highest Plan (BlueShield NetValue - Bay Area)	Any Plan except PERSCare	2nd Highest Plan (BlueShield NetValue - Bay Area)	2nd Highest Plan (BlueShield NetValue - Bay Area)	Flat amount for medical, dental, vision and/or life insurance	70% Blue Shield - Bay Area at Enrollment Level
Except for Prof & Tech Eng, there is no cash back for selecting a plan under the max monthly contribution amount.															
2. MONTHLY ALTERNATIVE BENEFIT IN LIEU OF MEDICAL CONTRIBUTIONS															
One Party	\$210.00	\$210.00	\$210.00	\$150.00	\$210.00	\$210.00	\$210.00	\$210.00	\$210.00	\$150.00	\$668.63	\$150.00	\$150.00		
Two Party	\$380.00	\$380.00	\$380.00	\$270.00	\$380.00	\$380.00	\$380.00	\$380.00	\$380.00	\$270.00	\$1,337.26	\$270.00	\$270.00	NONE	NONE
Three or More	\$500.00	\$500.00	\$500.00	\$350.00	\$500.00	\$500.00	\$500.00	\$500.00	\$500.00	\$350.00	\$1,738.44	\$350.00	\$350.00		
3. RETIREE MEDICAL															
Retired	After 12/31/07	After 12/31/07	After 12/31/07	After 12/31/07					Hired after 5/1/2012	Hired into HPMU After 6/12/12					
Paid Directly to PERS	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00	\$122.00		\$122.00
Reimbursed through A/P	<u>\$152.72</u>	<u>\$152.72</u>	<u>\$152.72</u>	<u>\$152.72</u>	<u>\$152.72</u>	<u>\$115.31</u>	<u>\$115.31</u>	<u>\$115.31</u>	<u>\$386.30</u>	<u>\$386.30</u>	<u>\$386.30</u>	<u>\$386.30</u>	<u>\$386.30</u>	NONE	<u>\$115.31</u>
Total Monthly Contribution	<u>\$274.72</u>	<u>\$274.72</u>	<u>\$274.72</u>	<u>\$274.72</u>	<u>\$274.72</u>	<u>\$237.31</u>	<u>\$237.31</u>	<u>\$237.31</u>	<u>\$508.30</u>	<u>\$508.30</u>	<u>\$508.30</u>	<u>\$508.30</u>	<u>\$508.30</u>		<u>\$237.31</u>
Retired	12/30/07 & Before	12/30/07 & Before	12/30/07 & Before	12/30/07 & Before					Hired before 05/01/12	Hired into HPMU 06/12/12 & Before					
Paid Directly to PERS	\$122.00	\$122.00	\$122.00	\$122.00					\$122.00	\$122.00					
Reimbursed through A/P	<u>\$104.01</u>	<u>\$104.01</u>	<u>\$104.01</u>	<u>\$104.01</u>					<u>\$592.45</u>	<u>\$592.45</u>					
Total Monthly Contribution	<u>\$226.01</u>	<u>\$226.01</u>	<u>\$226.01</u>	<u>\$226.01</u>					<u>\$714.45**</u>	<u>\$714.45**</u>					
EE contribution				\$35/pay period						1% of salary					
Vesting*	10 yrs of City service- Effective 1/1/08	10 yrs of City service- Effective 1/1/08	10 yrs of City service- Effective 1/1/08	10 yrs of City service- Effective 1/1/08	10 yrs of City service- Effective 1/1/06	NONE	NONE	NONE	10 yrs of City service- Effective 7/1/04	10 yrs of City service- Effective 1/1/03	10 yrs of City service- Effective 1/1/04	NONE	NONE	N/A	NONE
*Police - Vesting requirement does not apply to Industrial Disability Retirements. **This amount changes each year to match the Kaiser North single party rate															

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	CLERICAL	MAINTENANCE	CONFIDENTIAL	PROF & TECH ENG	HAME	UNREP Executive (Incl. Police & Fire Chief)	UNREP Non-Executive (Exempt)	UNREP Non-Executive (Non-Exempt)	POLICE	POLICE MGMT	FIRE	FIRE CHIEFS	FIRE OFFICERS	SR. & LIB PAGES (Budgeted & work 20 hrs or more)	ELECTED OFFICIALS
4. DENTAL PLAN MONTHLY PREMIUM, CITY CONTRIBUTION LISTED UNDER MOU/RESOLUTION															
Delta Dental - Monthly Premium	EE only \$64.46	EE only \$64.46	EE only \$64.46	EE only \$71.17	EE only \$71.17	EE only \$71.17	EE only \$71.17	EE only \$71.17	EE only \$79.78	EE only \$71.17	EE only \$79.78	EE only \$71.17	EE only \$71.17	EE only \$64.46	EE only \$71.17
	EE + 1 \$109.51	EE + 1 \$109.51	EE + 1 \$109.51	EE + 1 \$120.98	EE + 1 \$120.98	EE + 1 \$120.98	EE + 1 \$120.98	EE + 1 \$120.98	EE + 1 \$135.23	EE + 1 \$120.98	EE + 1 \$135.23	EE + 1 \$120.98	EE + 1 \$120.98	EE + 1 \$109.51	EE + 1 \$120.98
	EE + Fam \$167.49	EE + Fam \$167.49	EE + Fam \$167.49	EE + Fam \$185.02	EE + Fam \$185.02	EE + Fam \$185.02	EE + Fam \$185.02	EE + Fam \$185.02	EE + Fam \$206.83	EE + Fam \$185.02	EE + Fam \$206.83	EE + Fam \$185.02	EE + Fam \$185.02	EE + Fam \$167.49	EE + Fam \$185.02
United Concordia - Monthly Premium	EE Only \$25.20	EE Only \$25.20	EE Only \$25.20	EE Only \$25.20	EE Only \$25.20	EE Only \$25.20	EE Only \$25.20	EE Only \$25.20	EE Only \$25.20	EE Only \$25.20	EE Only \$25.20	EE Only \$25.20	EE Only \$25.20	EE Only \$25.20	EE Only \$25.20
	EE + 1 \$63.40	EE + 1 \$63.40	EE + 1 \$63.40	EE + 1 \$63.40	EE + 1 \$63.40	EE + 1 \$63.40	EE + 1 \$63.40	EE + 1 \$63.40	EE + 1 \$63.40	EE + 1 \$63.40	EE + 1 \$63.40	EE + 1 \$63.40	EE + 1 \$63.40	EE + 1 \$63.40	EE + 1 \$63.40
	EE + Fam \$63.40	EE + Fam \$63.40	EE + Fam \$63.40	EE + Fam \$63.40	EE + Fam \$63.40	EE + Fam \$63.40	EE + Fam \$63.40	EE + Fam \$63.40	EE + Fam \$63.40	EE + Fam \$63.40	EE + Fam \$63.40	EE + Fam \$63.40	EE + Fam \$63.40	EE + Fam \$63.40	EE + Fam \$63.40
MOU/Resolution	80% City paid	80% City paid	80% City paid	100% City paid	80% City paid	80% City paid	80% City paid	80% City paid	100% City paid	100% City paid	100% City paid	100% City paid	100% City paid	80% City paid	50% City paid
5. VISION PLAN MONTHLY PREMIUM, CITY CONTIBUTIONS LISTED UNDER MOU/RESOLUTION															
Exams & Lenses	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months
Frames	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months	Every 12 months
Vision Service Plan (VSP) Monthly	EE only \$6.77	EE only \$6.77	EE only \$6.77	EE only \$6.77	EE only \$6.77	EE only \$6.77	EE only \$6.77	EE only \$6.77	EE only \$6.77	EE only \$6.77	EE only \$6.77	EE only \$6.77	EE only \$6.77	EE only \$6.77	EE only \$6.77
	EE + 1 \$14.14	EE + 1 \$14.14	EE + 1 \$14.14	EE + 1 \$14.14	EE + 1 \$14.14	EE + 1 \$14.14	EE + 1 \$14.14	EE + 1 \$14.14	EE + 1 \$14.14	EE + 1 \$14.14	EE + 1 \$14.14	EE + 1 \$14.14	EE + 1 \$14.14	EE + 1 \$14.14	EE + 1 \$14.14
	EE + Fam \$24.69	EE + Fam \$24.69	EE + Fam \$24.69	EE + Fam \$24.69	EE + Fam \$24.69	EE + Fam \$24.69	EE + Fam \$24.69	EE + Fam \$24.69	EE + Fam \$24.69	EE + Fam \$24.69	EE + Fam \$24.69	EE + Fam \$24.69	EE + Fam \$24.69	EE + Fam \$24.69	EE + Fam \$24.69
MOU/Resolution	50% City paid	50% City paid	50% City paid	100% City paid	50% City paid	50% City paid	50% City paid	50% City paid	100% City paid	100% City paid	100% City paid	100% City paid	100% City paid	50% City paid	100% City paid
6. CITY PAID LIFE INSURANCE															
Coverage	\$50,000 FT & \$25,000 PT	\$50,000 FT & \$25,000 PT	\$50,000 FT & \$25,000 PT	\$50,000 FT & \$25,000 PT	1 X Annual Salary	1 X Annual Salary	1 X Annual Salary	1 X Annual Salary	NONE	1 X Annual Salary	NONE - offered through Local 1909	1 X Annual Salary	1 X Annual Salary	\$25,000	1 X Annual Salary
CIGNA - Monthly	\$5.00 FT & \$2.50 PT	\$5.00 FT & \$2.50 PT	\$5.00 FT & \$2.50 PT	\$5.00 FT & \$2.50 PT	.10 per \$1000/Annual Salary	.10 per \$1000/Annual Salary	.10 per \$1000/Annual Salary	.10 per \$1000/Annual Salary	N/A	.10 per \$1000/Annual Salary	N/A	.10 per \$1000/Annual Salary	.10 per \$1000/Annual Salary	\$2.50	.10 per \$1000/Annual Salary
7. SHORT TERM/LONG TERM DISABILITY INSURANCE															
City Provided Coverage	NONE - Covered by SDI	NONE - Covered by SDI	66 2/3 % of Salary	60% of Salary	66 2/3 % of Salary	66 2/3 % of Salary	66 2/3 % of Salary	66 2/3 % of Salary	NONE - Provided through POA	66 2/3 % of Salary	NONE - Provided through Local 1909	66 2/3 % of Salary	66 2/3 % of Salary	NONE	NONE
CIGNA - Monthly	N/A	N/A	\$0.577 per \$100 of covered payroll	\$0.25 per \$100 of covered payroll	\$0.577 per \$100 of covered payroll	\$0.577 per \$100 of covered payroll	\$0.577 per \$100 of covered payroll	\$0.577 per \$100 of covered payroll	N/A	\$0.577 per \$100 of covered payroll	N/A	\$0.577 per \$100 of covered payroll	\$0.577 per \$100 of covered payroll	N/A	N/A
8. STATE DISABILITY INSURANCE/PAID FAMILY LEAVE INSURANCE															
Coverage	Up to \$1,104/week	Up to \$1,104/week	NONE	Up to \$1,104/week	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	Up to \$1,104/week	NONE
EDD - Per Pay Period	1% X Salary, Max Withholding \$1,104 (Employee Paid)	1% X Salary, Max Withholding \$1,104 (Employee Paid)	N/A	1% X Salary, Max Withholding \$1,104 (Employee Paid)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	1% X Salary, Max Withholding \$1,104 (Employee Paid)	N/A

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	CLERICAL	MAINTENANCE	CONFIDENTIAL	PROF & TECH ENG	HAME	UNREP Executive (Incl. Police & Fire Chief)	UNREP Non-Executive (Exempt)	UNREP Non-Executive (Non-Exempt)	POLICE	POLICE MGMT	FIRE	FIRE CHIEFS	FIRE OFFICERS	SR. & LIB PAGES (Budgeted & work 20 hrs or more)	ELECTED OFFICIALS
9. CITY PROVIDED EMPLOYEE ASSISTANCE PROGRAM															
# of Sessions	10	10	10	7	10	10	10	10	20	20	7	7	7	10	NONE
Holman Group - Monthly	\$6.78	\$6.78	\$6.78	\$5.46	\$6.78	\$6.78	\$6.78	\$6.78	\$5.46	\$5.46	\$5.46	\$5.46	\$5.46	\$6.78	N/A
10a. RETIREMENT - PERS ("Classic" Members)															
Formula	2.5% @ 55	2.5% @ 55	2.5% @ 55	2.5% @ 55	2.5% @ 55	2.5% @ 55	2.5% @ 55	2.5% @ 55	3% @ 50	3% @ 50	3% @ 50	3% @ 50	3% @ 50	2.5% @ 55	2.5% @ 55, if elected to participate
CalPERS Published Employer Rate	24.467%	24.467%	24.467%	24.467%	24.467%	24.467%	24.467%	24.467%	36.398%	36.398%	34.397%	34.397%	34.397%	22.063%	22.063%
CalPERS Published Employee Rate	8.000%	8.000%	8.000%	8.000%	8.000%	8.000%	8.000%	8.000%	9.000%	9.000%	9.000%	9.000%	9.000%	8.000%	8.000%
Employer Rate (EE Paid)	1.500%	1.500%	1.500%	0.000%	1.000%	1.000%	1.000%	1.000%	6.000%	6.000%	6.000%	6.000%	6.000%	0.000%	0.000%
Employer Rate (City Paid)	22.967%	22.967%	22.967%	24.467%	23.467%	23.467%	23.467%	23.467%	30.398%	30.398%	28.397%	28.397%	28.397%	22.063%	22.063%
Employee Rate (EE paid)	8.000%	8.000%	8.000%	8.000%	8.000%	8.000%	8.000%	8.000%	9.000%	9.000%	9.000%	7.000%	7.000%	8.000%	8.000%
Employee Rate (City paid)	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	2.000%	2.000%	0.000%	0.000%
Total City paid PERS	22.967%	22.967%	22.967%	24.467%	23.467%	23.467%	23.467%	23.467%	30.398%	30.398%	28.397%	30.397%	30.397%	22.063%	22.063%
Total Employee paid PERS	9.500%	9.500%	9.500%	8.000%	9.000%	9.000%	9.000%	9.000%	15.000%	15.000%	15.000%	13.000%	13.000%	8.000%	8.000%
10b. RETIREMENT - PERS ("New" Members)															
Formula	2.0% @ 62	2.0% @ 62	2.0% @ 62	2.0% @ 62	2.0% @ 62	2.0% @ 62	2.0% @ 62	2.0% @ 62	2.7% @ 57	2.7% @ 57	2.7% @ 57	2.7% @ 57	2.7% @ 57	2.0% @ 62	2.0% @ 62, if elected to participate
CalPERS Published Employer Rate	24.467%	24.467%	24.467%	24.467%	24.467%	24.467%	24.467%	24.467%	36.398%	36.398%	34.397%	35.897%	35.897%	22.063%	22.063%
CalPERS Published Employee Rate	6.250%	6.250%	6.250%	6.250%	6.250%	6.250%	6.250%	6.250%	12.750%	12.750%	11.250%	11.250%	11.250%	6.250%	6.250%
Employer Rate (EE Paid)	1.500%	1.500%	1.500%	0.000%	1.000%	1.000%	1.000%	1.000%	2.250%	2.250%	3.750%	3.750%	3.750%	0.000%	0.000%
Employer Rate (City Paid)	22.967%	22.967%	22.967%	24.467%	23.467%	23.467%	23.467%	23.467%	34.148%	34.148%	30.647%	32.147%	32.147%	22.063%	22.063%
Employee Rate (EE paid)	6.250%	6.250%	6.250%	6.250%	6.250%	6.250%	6.250%	6.250%	12.750%	12.750%	11.250%	9.250%	9.250%	6.250%	6.250%
Employee Rate (City paid)	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	2.000%	2.000%	0.000%	0.000%
Total City paid PERS	22.967%	22.967%	22.967%	24.467%	23.467%	23.467%	23.467%	23.467%	34.148%	34.148%	30.647%	34.147%	34.147%	22.063%	22.063%
Total Employee paid PERS	7.750%	7.750%	7.750%	6.250%	7.250%	7.250%	7.250%	7.250%	15.000%	15.000%	15.000%	13.000%	13.000%	6.250%	6.250%

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	CLERICAL	MAINTENANCE	CONFIDENTIAL	PROF & TECH ENG	HAME	UNREP Executive (Incl. Police & Fire Chief)	UNREP Non-Executive (Exempt)	UNREP Non-Executive (Non-Exempt)	POLICE	POLICE MGMT	FIRE	FIRE CHIEFS	FIRE OFFICERS	SR. & LIB PAGES (Budgeted & work 20 hrs or more)	ELECTED OFFICIALS
11. MEDICARE - Hired After 3/31/86															
Medicare - Per Pay Period	1.45% X Salary (Employee & City Paid)	1.45% X Salary (Employee & City Paid)	1.45% X Salary (Employee & City Paid)	1.45% X Salary (Employee & City Paid)	1.45% X Salary (Employee & City Paid)	1.45% X Salary (Employee & City Paid)	1.45% X Salary (Employee & City Paid)	1.45% X Salary (Employee & City Paid)	1.45% X Salary (Employee & City Paid)	1.45% X Salary (Employee & City Paid)	1.45% X Salary (Employee & City Paid)	1.45% X Salary (Employee & City Paid)	1.45% X Salary (Employee & City Paid)	1.45% X Salary (Employee & City Paid)	1.45% X Salary (Employee & City Paid)
*Effective 1/1/13, an additional Medicare Tax of 0.9% is applicable to wages and compensation received in excess of: Married filing joint - \$250,000; Married filing separately - \$125,000; Single/Head of Household/Qualifying widow(er) - \$200,000															
12. EDUCATIONAL REIMBURSEMENT															
Annual - Subject to MOU Restrictions & Limit	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	NONE	\$750	NONE	NONE	NONE	NONE	NONE
13. HOLIDAYS															
Annual - Total Days	14.5	14.5	14.5	14.5	14.5	14.5	14.5	14.5	14	14	(40 hrs) 14	14	14	58 hours	NONE
Christmas Eve - Hours	8	8	8	8	8	8	8	8	4	0	4	4	4		
New Year's Eve - Hours	4	4	4	4	4	4	4	4	4	0	4	4	4		
13. HOLIDAY PAY															
Per Pay Period	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	(40 hrs) 6.73 % X Salary	(40 hrs) 6.73 % X Salary	(56 hrs) 5.77 % X Salary	(56 hrs) 5.77 % X Salary	(56 hrs) 5.77 % X Salary	NONE	NONE
14. VACATION LEAVE ACCRUALS															
Annual	1st yr - 80 hrs	1st yr - 80 hrs	1st yr - 80 hrs	1st yr - 80 hrs	1st yr - 80 hrs	1st yr - 80 hrs	1st yr - 80 hrs	1st yr - 80 hrs	1st yr - 80 hrs	1st yr - 80 hrs	(40 hrs)	(40 hrs)	(40 hrs)	1st yr - 80 hrs	NONE
	5-9 yrs -120 hrs	5-9 yrs -120 hrs	5-9 yrs -120 hrs	5-9 yrs -120 hrs	5-9 yrs -120 hrs	5-9 yrs -120 hrs	5-9 yrs -120 hrs	5-9 yrs -120 hrs	5-9 yrs -120 hrs	5-9 yrs -120 hrs	1st yr - 100 hrs	1st yr - 100 hrs	1st yr - 100 hrs	5-9 yrs -120 hrs	
	10 yrs+ -160 hrs	10 yrs+ -160 hrs	10 yrs+ -160 hrs	10 yrs+ -160 hrs	10 yrs+ -160 hrs	10 yrs+ -160 hrs	10 yrs+ -160 hrs	10 yrs+ -160 hrs	10 yrs+ -160 hrs	10-14 yrs - 160 hrs	5-14 yrs - 160 hrs	5-14 yrs - 160 hrs	5-14 yrs - 160 hrs	10 yrs+ -160 hrs	
	20 yrs+ - 200 hrs	20 yrs+ - 200 hrs	20 yrs+ - 200 hrs	20 yrs+ - 200 hrs	20 yrs+ - 200 hrs	20 yrs+ - 200 hrs	20 yrs+ - 200 hrs	20 yrs+ - 200 hrs	20 yrs+ - 200 hrs	15 yrs+ - 200 hrs	15 yrs+ - 200 hrs	15 yrs+ - 200 hrs	15 yrs+ - 200 hrs	20 yrs+ - 200 hrs	
											(56 hrs)	(56 hrs)	(56 hrs)	* Prorated based on actual hrs worked	
											1st yr - 169 hrs	1st yr - 100 hrs	1st yr - 100 hrs		
											5-14 yrs - 240 hrs	5-14 yrs - 160 hrs	5-14 yrs - 160 hrs		
											15 yrs+ - 300 hrs	15 yrs+ - 200 hrs	15 yrs+ - 200 hrs		

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	CLERICAL	MAINTENANCE	CONFIDENTIAL	PROF & TECH ENG	HAME	UNREP Executive (Incl. Police & Fire Chief)	UNREP Non-Executive (Exempt)	UNREP Non-Executive (Non-Exempt)	POLICE	POLICE MGMT	FIRE	FIRE CHIEFS	FIRE OFFICERS	SR. & LIB PAGES (Budgeted & work 20 hrs or more)	ELECTED OFFICIALS
15. SICK LEAVE ACCRUALS															
Annual	96 hrs	96 hrs	96 hrs	96 hrs	96 hrs	96 hrs	96 hrs	96 hrs	96 hrs	96 hrs	(40 hrs) - 103 hrs	(40 hrs) - 103 hrs	(40 hrs) - 103 hrs	96 hrs	NONE
Max Accumulation	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	(56 hrs) - 144 hrs	(56 hrs) - 144 hrs	(56 hrs) - 144 hrs	*Prorated based on hrs worked	N/A
Separation Payoff*	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	Varies - 0% - 1.5% X City service years X Payrate	Varies - 0% - 1.5% X City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	N/A
*Employee must leave in good standing. Also, employee must have 20 yrs of City service at time of separation or separate due to retirement or death. HAME and Unrepresented employees hired after 4/1/2012 are not eligible for sick leave payout upon separation.															
16. UNIFORM ALLOWANCE															
Annual	\$275* (paid on a per pay period basis)	Up to \$250 - Safety Shoes*	NONE	\$275 - Police ID Spec* Up to \$200 - Safety Shoes* Up to \$125 - Prescription Safety Glasses*	Up to \$250 - Safety Shoes*	\$480 - Fire Chief \$440 - Police Chief	NONE	NONE	\$900 (paid on a per pay period basis)	\$440 (paid on a per pay period basis)	\$430 (paid on a per pay period basis)	\$480 (paid on a per pay period basis)	\$480 (paid on a per pay period basis)	NONE	NONE
*For certain classifications per MOU															
17. EDUCATIONAL INCENTIVE															
Per Pay Period	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	2.5% - 15% depending on POST, degree, & years of service (see MOU for more information)	2.5% - 50 hrs approved study (or equiv (3 sem/4 qtr) 2.5% - POST Intern 5.0% POST Adv 7.5% max @ 10 yrs	2.5% - AA 5.0% - BA 7.5% perm @ 10 yrs	2.5% - AA 5.0% - BA 7.5% perm @ 10 yrs	2.5% - AA 5.0% - BA 7.5% perm @ 10 yrs	NONE	NONE
18. HEALTH AND WELLNESS REIMBURSEMENT															
Monthly Maximum	\$50.00	\$50.00	\$50.00	NONE	\$50.00	\$100.00	\$50.00	\$50.00	NONE	NONE	NONE	NONE	NONE	NONE	NONE
19. PROFESSIONAL DEVELOPMENT REIMBURSEMENT															
Annual Maximum	NONE	NONE	NONE	NONE	\$500.00	NONE	\$500.00	\$350.00	NONE	NONE	NONE	NONE	NONE	NONE	NONE